07/23/2008 14:21

Image# 28991631951

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) 655 Beach Street ADDRESS (number and street) Check if different than previously San Francisco CA 94109 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS **AMENDED** NEW C00196246 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Χ Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 12 0 1 2007 12 3 1 2007 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Benjamin Bank Type or Print Name of Treasurer Electronically Filed by Benjamin Bank 07 23 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) D D D 12 1 2 0 1 2007 3 1 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand Ž007 683911.43 January 1 (b) Cash on Hand at 849369.51 Begining of Reporting Period 62729.17 660138.22 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 912098.68 1344049.65 6(a) and 6(c) for Column B) 15677.32 447628.29 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 896421.36 896421.36 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

0 1 м м 1 2 м м 1 2 3^D1 2007 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 561730.25 54706.25 (i) Itemized (use Schedule A) 4910.25 78220.00 (ii) Unitemized (iii) TOTAL (add 59616.50 639950.25 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 59616.50 639950.25 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 3112.67 20187.97 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 62729.17 660138.22 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 62729.17 660138.22

(subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 1712.32 13244.73 Expenditures..... (c) Total Operating Expenditures 1712.32 13244.73 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 13500.00 427352.31 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 465.00 7031.25 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 465.00 7031.25 (add Lines 28(a), (b), and (c)) 0.00 0.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 15677.32 447628.29 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 15677.32 447628.29

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributi Expenditu		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other from Line 11(d), page 3)	· · · · · · · · · · · · · · · · · · ·	59616.50	639950.25
34. Total Contribution Refur (from Line 28(d))		465.00	7031.25
85. Net Contributions (other (subtract Line 34 from L	' I	59151.50	632919.00
36. Total Federal Operating (add Line 21(a)(i) and Li	· ·	1712.32	13244.73
37. Offsets to Operating Exp (from Line 15, page 3)		0.00	0.00
38. Net Operating Expenditu (subtract Line 37 from L		1712.32	13244.73

FE6AN026

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persolates of any political committee to	
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	/ Inc Political	Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) Sharron Acosta			Date of Receipt
Mailing Address Eye Associates of Seg 128 S Moss Street Sui			12 18 2007
City	State	Zip Code	Transaction ID: 0639522
<u>Seguin</u>	TX	78155	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
Receipt For:	 	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	500.00]
Full Name (Last, First, Middle Initial) Marcus Allen			Date of Receipt
Mailing Address 4404 Stanford Avenue)		12 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 44cb8b05dcdc9294e
Dallas	TX	75225-6935	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		91.25
Name of Employer self	Occupation Ophthaln		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 273.75	
Full Name (Last, First, Middle Initial) John Armstrong			Date of Receipt
Mailing Address 1590 Darling Street			M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City	State	Zip Code	Transaction ID: 4TP5DZ144163
Ogden	UT	84403-0445	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
	1		1091.25

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	/ Inc Politica	I Committee (OPHTHPAC)	
	Full Name (Last, First, Middle Initial) Joe Arterberry			Date of Receipt
	Mailing Address Suite 110 224 E Broadway			12 14 2007
	City	State	Zip Code	Transaction ID: 4UYFKT217815
	Louisville	KY	40202-2016	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	7
_	Full Name (Last, First, Middle Initial) David Auerbach			Date of Receipt
	Mailing Address Eye Physicians of Cer 225 West State Road			12 20 YYYYY 12 20 2007
	City	State	Zip Code	Transaction ID: 4TP5DH876851
	Longwood	FL	32750	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
	Receipt For:	, ' ' ' 	e Year-to-Date ▼	
	Primary General Other (specify) ▼		365.00	
	Full Name (Last, First, Middle Initial) John Barnes			Date of Receipt
	Mailing Address PO Box 5620			M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
	City	State	Zip Code	Transaction ID: FL4FY3379460
	San Angelo	TX	76902-5620	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	SUBTOTAL of Receipts This Page (optional)	1		1365.00

I 7	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS any information copied from such Reports and S	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	name and ad	dress of any political committee t	o solicit contributions from such committee.
<u>∠</u> A .	Full Name (Last, First, Middle Initial) A Robert Bellows Mailing Address 50 Staniford St Ste 60			Date of Receipt 1 2 0 4 2 0 0 7
	City	State	Zip Code	Transaction ID: 67D29551-4177-4936-
	Boston FEC ID number of contributing federal political committee.	C	02114-2539	Amount of Each Receipt this Period 1000.00
	Name of Employer self Receipt For:	Occupation Ophthali Aggregate		
_	Primary General Other (specify) ▼		1000.00	
В.	Full Name (Last, First, Middle Initial) Andrew Berman Mailing Address 9630 N Kenton Avenue	e		Date of Receipt 1 2 2 0 2 0 7
	City	State	Zip Code	Transaction ID: 4TP5DH184383
	Skokie	IL	60076-1216	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00 Batch Tool - PAC
	Name of Employer self	Occupation Ophthali		Battil 1001 - FAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 365.00	
с. _	Full Name (Last, First, Middle Initial) Thomas Bersani Mailing Address 1810 Erie Boulevard E	inet		Date of Receipt
				12 06 2007
	City	State	Zip Code	Transaction ID: FL4FX6958791
	Syracuse FEC ID number of contributing federal political committee.	C	13210-1230	Amount of Each Receipt this Period 365.00
	Name of Employer self	Occupation Ophthali		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	, ' ' ' 	e Year-to-Date ▼ 465.00	
	SUBTOTAL of Receipts This Page (optional)			1730.00
-	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 58 (check only one) X
A	ny information copied from such Reports and for commercial purposes, other than using th	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Academy of Ophthalmolog	y Inc Politica	I Committee (OPHTHPAC)	
	Full Name (Last, First, Middle Initial) Charles Birnbach			Date of Receipt
	Mailing Address Suite 200 2821 Northup Way			12 06 2007
	City Bellevue	State WA	Zip Code	Transaction ID: FL4FZ8725974
	FEC ID number of contributing federal political committee.	C	98004-1496	Amount of Each Receipt this Period 500.00
	Name of Employer self	Occupation Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	 	e Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Norman Blair			Date of Receipt
	Mailing Address 1905 W Taylor Street	t		12 20 7 2007
	City	State	Zip Code	Transaction ID: 4TP5DH862838
	Chicago	<u> L</u>	60612-3731	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation Ophthalr		Batch Tool - PAC
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		730.00	
	Full Name (Last, First, Middle Initial) Adam Bloom			Date of Receipt
	Mailing Address Precision Eye Care 1700 E Jericho Turnp	ike		12 20 7 2007
	City Huntington	State NY	Zip Code 11743	Transaction ID: 4TP5DZ271452
	FEC ID number of contributing federal political committee.	C	11745	Amount of Each Receipt this Period 300.00
	Name of Employer self	Occupation Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			1165.00

A. Full Nam Louis Blui Mailing A City Longwo FEC ID r federal po Name of self Receipt F Prii Oth Full Nam Evelyne E Mailing A City Minot FEC ID r federal po	ercial purposes, other than using the of COMMITTEE (In Full) an Academy of Ophthalmology	name and add	dress of any political committee to	on for the purpose of soliciting contributions
A. Louis Bluin Mailing A City Longwo FEC ID r federal por Self Receipt F Prin Oth Full Name Evelyne E Mailing A City Minot FEC ID r federal por Self		Inc Politica	I Committee (OPHTHPAC)	o solicit contributions from such committee.
Receipt F Pril Oth B. Full Nam Evelyne E Mailing A City Minot FEC ID r federal po				Date of Receipt 1 2 2 0 7 2 0 7
Receipt F Prii Oth Full Nam Evelyne E Mailing A City Minot FEC ID r federal po		State	Zip Code	Transaction ID: 4TP5DH360647
Receipt F Prin Oth Full Nam Evelyne E Mailing A City Minot FEC ID r federal po	ood	FL	32750-4980	Amount of Each Receipt this Period
Full Name of Name of	number of contributing olitical committee.	C		365.00
Full Nam Evelyne E Mailing A City Minot FEC ID r federal po	Employer	Occupatio Ophthalr		Batch Tool - PAC
B. Evelyne E Mailing A City Minot FEC ID r federal po	For: mary General ner (specify) ▼	Aggregate	e Year-to-Date ▼ 365.00	
Minot FEC ID r federal po	ne (Last, First, Middle Initial) Bouchard-Kindy Address 120 Buidick Expwy Eas	t		Date of Receipt 1 2 0 6 2 0 0 7
Minot FEC ID r federal po		State	Zip Code	Transaction ID: FL4FX6587574
federal po		ND	58701	Amount of Each Receipt this Period
	number of contributing olitical committee.	С		250.00
	Employer	Occupatio Ophthalr		Batch Tool - PAC
	For: mary	Aggregate	e Year-to-Date ▼ 250.00	
C. C Bradley	e (Last, First, Middle Initial)			Date of Receipt
Mailing A City	ddress Cornea Associates of T 7150 Greenville Avenue		Zip Code	1 2 0 6 2 0 0 7 Transaction ID: FL4FX6175342
Dallas		TX	75231	Amount of Each Receipt this Period
FEC ID r	number of contributing olitical committee.	С		500.00
Name of self	Employer	Occupatio Ophthalr		Batch Tool - PAC
	For: mary General ner (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAI	L of Receipts This Page (optional)			1115.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 58 (check only one) X
4	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Academy of Ophthalmolog	y Inc Politica	I Committee (OPHTHPAC)	
A.	Full Name (Last, First, Middle Initial) Jill Brody			Date of Receipt
	Mailing Address McDonough Eye Asso 505 E Grant Street	С		12 14 2007
	City	State	Zip Code	Transaction ID: E31986E9-B829-4C70-
	Macomb FEC ID number of contributing federal political committee.	C	61455	Amount of Each Receipt this Period 500.00
	Name of Employer self	Occupation		
	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 500.00	
— В.	Full Name (Last, First, Middle Initial) John Bullock			Date of Receipt
	Mailing Address 400 Westhampton St	ation		12 06 2007
	City	State	Zip Code	Transaction ID: FL4FX6383891
	Richmond FEC ID number of contributing federal political committee.	C	23226-3330	Amount of Each Receipt this Period 500.00
	Name of Employer self	Occupation Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
с. С.	Full Name (Last, First, Middle Initial) Charles Campbell	1		Date of Receipt
	Mailing Address Suite 200 5540 Saratoga Boule			12 06 2007
	City Corpus Christi	State TX	Zip Code 78413-2953	Transaction ID: FL4FY3628875 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	70410 2000	1000.00
	Name of Employer self	Occupation Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional) .			2000.00
	TOTAL This Period (last page this line numbe	r only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 58 (check only one) X
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ a .	Full Name (Last, First, Middle Initial) John Cason Mailing Address Psc 490 Box 7686			Date of Receipt
	City Fleet Post Office	State AP	Zip Code 96538-0490	Transaction ID: FL4FY3724312 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00 Batch Tool - PAC
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupatio ophthalm Aggregate		
3.	Full Name (Last, First, Middle Initial) D Alan Chandler Mailing Address 10271 Matthews Grove	e Ln		Date of Receipt
	City	State	Zip Code	Transaction ID: 94EF6739-431F-4F1F-
	Mechanicsville FEC ID number of contributing federal political committee.	C	23116-5151	Amount of Each Receipt this Period 365.00
	Name of Employer self	Occupatio Ophthalr		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 365.00	
_	Full Name (Last, First, Middle Initial) Bennett Chotiner			Date of Receipt
	Mailing Address Mem Eye Inst 4100 Linglestown Road			12 21 2007
	City <u>Harrisburg</u>	State PA	Zip Code 17112	Transaction ID: 88ZEQZ534876 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Ę	SUBTOTAL of Receipts This Page (optional)			1865.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Ai	ny information copied from such Reports and for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Academy of Ophthalmolog	y Inc Politica	I Committee (OPHTHPAC)	
	Full Name (Last, First, Middle Initial) Mark Cichowski			Date of Receipt
	Mailing Address PO Box 1227			12 20 7 20 7
	City	State	Zip Code	Transaction ID: 4TP5DZ555488
	Coupeville FEC ID number of contributing federal political committee.	C	98239-1227	Amount of Each Receipt this Period 200.00
	Name of Employer self	Occupatio		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Ophthalr Aggregate	nologist e Year-to-Date ▼ 450.00	
-	Full Name (Last, First, Middle Initial) Grace Cinciripini			Date of Receipt
	Mailing Address 514 - 34th Avenue			12 06 2007
	City	State	Zip Code	Transaction ID: FL4FZZ320423
	Seattle	WA	98122-6472	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self	Occupation Ophthalr		Batch Tool - PAC
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
	Full Name (Last, First, Middle Initial) Carl Clavenna			Date of Receipt
	Mailing Address Clavenna Vision Insti 600 S Adams Road S			12 06 2007
	City Birmingham	State MI	Zip Code 48009-6861	Transaction ID: FL4FY3356361 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000 0001	500.00
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 500.00	
		1		1200.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per ne name and address of any political committee	son for the purpose of soliciting contributions
American Academy of Ophthalmolog	gy inc Folitical Committee (OFTTTIFAC)	
Full Name (Last, First, Middle Initial) James Conahan Mailing Address Suite 400		Date of Receipt
2005 Franklin Street		12 06 2007
City	State Zip Code	Transaction ID: FL4FY3724394
Denver	CO 80205-5405	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	365.00
Name of Employer self	Occupation Ophthalmologist	Batch Tool - PAC
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) George Cooper		Date of Receipt
Mailing Address Suite 101A 2139 Valleygate Drive		12 22 2007
City	State Zip Code	Transaction ID: ea2544ec8bbcedfb7
<u>Fayetteville</u>	NC 28304-3666	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer self	Occupation Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Gary Cowan		Date of Receipt
Mailing Address 1350 S Main St Ste 3200		12 06 2007
City	State Zip Code	Transaction ID: 45b1a01078fd2893f
Fort Worth	TX 76104-7669	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer self	Occupation Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1250.00	
SURTOTAL of Receipts This Page (entional)		740.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for	nformation copied from such Reports and S commercial purposes, other than using the AME OF COMMITTEE (In Full) merican Academy of Ophthalmology	e name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
A. Ja M Ci Ci FE fe Ni se	ape Coral EC ID number of contributing deral political committee. ame of Employer	State FL C Occupatio Ophthalr		Date of Receipt M M O O O O O O O O O O O O O O O O O
B. Name of the second s	asadena EC ID number of contributing deral political committee. ame of Employer	State CA C Occupatio Ophthalr	Zip Code 91107-1409	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 0 7 Transaction ID: 0DD5A5D3-6EEB-42FE Amount of Each Receipt this Period 300.00
C. Di M Ci Gi FE fe Ni se	EC ID number of contributing deral political committee.	State MN C Occupatio Ophthalr		Date of Receipt 1 2 0 6 2 0 0 7 Transaction ID: FL4FX6141717 Amount of Each Receipt this Period 1000.00 Batch Tool - PAC
SUB	TOTAL of Receipts This Page (optional)			1800.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 58 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Ophthalmolog	ne name and addr	ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) William Deutsch Mailing Address Suite 918 1725 West Harrison S City Chicago FEC ID number of contributing federal political committee. Name of Employer self	State IL C	Zip Code 60612-3863	Date of Receipt 1 2 0 6 2 0 0 7 Transaction ID: FL4FZZ851757 Amount of Each Receipt this Period 500.00 Batch Tool - PAC
Receipt For: Primary General Other (specify)	Ophthalmo Aggregate \	ologist Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Michael Drinnan Mailing Address Suite 310 101 S San Mateo Driv City	State	Zip Code	Date of Receipt 1 2 1 4 2 0 0 7 Transaction ID: 4UYFKT281687
San Mateo FEC ID number of contributing federal political committee. Name of Employer self	CA C Occupation Ophthalmo	94401-3844	Amount of Each Receipt this Period 500.00 Batch Tool - PAC
Receipt For: Primary General Other (specify)		Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Stuart Duboff Mailing Address Advanced Eye Care 322 Dewey Street			Date of Receipt 1 2 1 3 2 0 0 7
City Bennington FEC ID number of contributing federal political committee.	State VT	Zip Code 5201	Transaction ID: 4UYFL6861325 Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation Ophthalm		Batch Tool - PAC
Receipt For: Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			1250.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16
or	y information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per e name and address of any political committee	rson for the purpose of soliciting contributions
\rangle	• •	y Inc Political Committee (OPHTHPAC)	
	Full Name (Last, First, Middle Initial) William Fronczek		Date of Receipt
	Mailing Address 4160 Washington Ro	ad	12 06 2007
	City Mc Murray	State Zip Code PA 15317-2533	Transaction ID: FL4FY3593312
	FEC ID number of contributing federal political committee.	PA 15317-2533	Amount of Each Receipt this Period 500.00
	Name of Employer self	Occupation Ophthalmologist	Batch Tool - PAC
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) David Gajda		Date of Receipt
	Mailing Address 6228 Yellowstone Ro	1 2 0 6 2 0 0 7	
	City	State Zip Code	Transaction ID: FL4FX6882425
	Cheyenne	WY 82009-3432	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer self	Occupation Ophthalmologist	Batch Tool - PAC
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Henry Gelender		Date of Receipt
	Mailing Address Suite 600 - Attn: Jenr 7150 Greenville Aven	ue	12 20 2007
	City Dallas	State Zip Code TX 75231-5187	Transaction ID: 4TP5DH557674 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer self	Occupation Ophthalmologist	Batch Tool - PAC
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	IDTOTAL of Descripts This Descriptional		1250.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 58 (check only one) X
(Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Academy of Ophthalmolog	y Inc Politica	I Committee (OPHTHPAC)	
Δ. Δ.	Full Name (Last, First, Middle Initial) James Gessler			Date of Receipt
	Mailing Address 1229 E Seminole Stre			12 06 2007
	City Springfield	State MO	Zip Code 65804-2227	Transaction ID: FL4FZZ607150 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		2000.00
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	- ' ' '	e Year-to-Date ▼ 2000.00	
_ B.	Full Name (Last, First, Middle Initial) Robert Gold			Date of Receipt
	Mailing Address Suite 111 225 W State Road 43	4		12 20 7 2007
	City S		Zip Code	Transaction ID: 4TP5DH168225
	Longwood FEC ID number of contributing federal political committee.	C	32750-4980	Amount of Each Receipt this Period 365.00
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼	0 0	365.00	
-).	Full Name (Last, First, Middle Initial) Stacia Goldey	1		Date of Receipt
	Mailing Address 17560 US Highway 4	41		12 18 2007
	City	State	Zip Code	Transaction ID: c8ea46635a19f2967a8
	Mount Dora FEC ID number of contributing federal political committee.	C	32757-6711	Amount of Each Receipt this Period 125.00
	Name of Employer self	Occupatio Ophthalr		
	Receipt For: Primary General Other (specify) ▼	- ' 	e Year-to-Date ▼ 500.00	
Γ		l		2490.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	name and add	dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u>∠</u> A .	Full Name (Last, First, Middle Initial) Lynn Gordon Mailing Address 100 Stein Plaza City Los Angeles FEC ID number of contributing federal political committee.	State CA	Zip Code 90095-7065	Date of Receipt 1 2 1 7 2 0 0 7 Transaction ID: 440da4e53d785c7251e Amount of Each Receipt this Period 91.25
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthaln Aggregate		
В.	Full Name (Last, First, Middle Initial) Edward Graul Mailing Address 251 Moosa Boulevard City	State LA	Zip Code	Date of Receipt 1 2 1 8 2 0 0 7 Transaction ID: 22b31678a37a22b34ab
	Eunice FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General	Occupatio Ophthaln	nologist e Year-to-Date ▼	Amount of Each Receipt this Period 91.25
_ C.	Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael Green Mailing Address 854 Lone Oak Dr		365.00	Date of Receipt 1 2 1 3 2 0 0 7
	City Gallatin FEC ID number of contributing federal political committee.	State TN	Zip Code 37066-3694	Transaction ID: 3679C99E-EF47-4BFD- Amount of Each Receipt this Period 365.00
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthaln Aggregate		
	SUBTOTAL of Receipts This Page (optional)	I		547.50

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	e name and ad	dress of any political committee to	o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Christopher Greer Mailing Address Cooper Clinic PO Box 3528 City Fort Smith FEC ID number of contributing federal political committee. Name of Employer self	State AR C Occupation Ophthali		Date of Receipt M
_	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Erich Groos Mailing Address Cornea Consultants of 2011 Murphy Avenue City Nashville FEC ID number of contributing federal political committee.		Zip Code 37203	Date of Receipt 1 2 0 6 2 0 0 7 Transaction ID: FL4FY3822148 Amount of Each Receipt this Period 1000.00
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthalr Aggregate		Batch Tool - PAC
с.	Full Name (Last, First, Middle Initial) Thomas Harbin Mailing Address 3888 Tuxedo Road City Atlanta FEC ID number of contributing federal political committee.	State GA	Zip Code 30342-4034	Date of Receipt M M
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthalr Aggregate		Batch Tool - PAC
	SUBTOTAL of Receipts This Page (optional)			1375.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 58 (check only one) X
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)			
Α.	Paul Harton Mailing Address Harbin Clinic Eye Cen 1825 Martha Berry Bo	ter		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 457f9d56fe65663afdd5
	Rome	GA	30165	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	Name of Employer self	Occupation Ophthalr		
	Receipt For: Primary General Other (specify) ▼	, ' · · · · · · · · · · · · · · · · · · 	e Year-to-Date ▼ 375.00	
_ В.	Full Name (Last, First, Middle Initial) Christopher Haupert	l		Date of Receipt
	Mailing Address Iowa Retina Consultar 1501 50th Street Suite	12 18 2007		
	City	State	Zip Code	Transaction ID: 2636f2c85d614e5ce8a
	West Des Moines FEC ID number of contributing federal political committee.	C	50266	Amount of Each Receipt this Period 91.25
	Name of Employer self	Occupation Ophthalr		
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼	0 0	365.00	
с. С.	Full Name (Last, First, Middle Initial) Paul Hiss			Date of Receipt
	Mailing Address 2285 Green Vista Driv	e		12 12 2007
	City	State	Zip Code	Transaction ID: 4b1f879a78cf5626c51c
	Sparks	NV	89431-1071	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer self	Occupation Ophthalr		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
	SUBTOTAL of Receipts This Page (optional)			466.25
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\ \	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	name and ad	dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Michael Hunt Mailing Address Suite 110			Date of Receipt
	1325 Pennsylvania Ave		Zip Code	12 06 2007
	City <u>Fort Worth</u>	State TX	76104-2146	Transaction ID: FL4FX6593543 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	70104 2140	300.00
	Name of Employer self	Occupation Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
В.	Full Name (Last, First, Middle Initial) Mark Jacobson Mailing Address Rochester Eye Center			Date of Receipt
	30 N Union Street			12 07 2007
	City	State	Zip Code	Transaction ID: F5DD9BE0-3047-4A05-
	Rochester	NY	14607	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self	Occupation Ophthalr	mologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
С. С.	Full Name (Last, First, Middle Initial) Gary Jamell			Date of Receipt
	Mailing Address Suite 120 3601 S Clarkson Street			12 21 2007
	City	State	Zip Code	Transaction ID: afdf338311643ae46f1
	Englewood	CO	80113-3945	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		91.25
	Name of Employer self	Occupation Ophthalr	mologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)	0 0	365.00	
	SUBTOTAL of Receipts This Page (optional))	891.25
f	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	/ Inc Politica	I Committee (OPHTHPAC)	
∠ A .	Full Name (Last, First, Middle Initial) David Johnson			Date of Receipt
	Mailing Address Suite 210 8101 E Lowry Bouleva	ard		12 22 2007
	City Denver	State CO	Zip Code 80230-7195	Transaction ID: 1482f6083bc30344a1c Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00250 7155	250.00
	Name of Employer self	Occupatio Ophthalr		7
	Receipt For: Primary General Other (specify) ▼	, ' · · · · · · · · · · · · · · · · · · 	e Year-to-Date ▼ 1500.00	
- В.	Full Name (Last, First, Middle Initial) Leonard Alan Johnson	1		Date of Receipt
	Mailing Address Sierra Eye Assoc 950 Ryland Street	12 18 2007		
	City	State	Zip Code	Transaction ID: 635510b228825b635f5
	Reno FEC ID number of contributing federal political committee.	C	89502	Amount of Each Receipt this Period 125.00
	Name of Employer self	Occupatio Ophthalr		
	Receipt For: Primary General Other (specify) ▼	, ' '	Year-to-Date ▼ 500.00	
- C.	Full Name (Last, First, Middle Initial) Robert Kalina			Date of Receipt
	Mailing Address Department of Ophth Univ of Wa Box 35648	35		12 20 207
	City <u>Seattle</u>	State WA	Zip Code 98195-6485	Transaction ID: 4TP5DH797167 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	90193-0403	365.00
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	, ' ' ' 	e Year-to-Date ▼ 365.00	
	SUBTOTAL of Receipts This Page (optional)			740.00
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 58 (check only one) X 11a
(Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Ophthalmology			on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Stephen Kamenetzky Mailing Address 340 New Salem Drive			Date of Receipt 1 2 0 4 2 0 0 7
	City St. Louis	State MO	Zip Code 63141-8349	Transaction ID: C1UECX621756 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00141 0040	500.00
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupatio Ophthalr Aggregate		Batch Tool - PAC
_ В.	Full Name (Last, First, Middle Initial) Douglas Kaplan Mailing Address 95 Tamarisk Ln	1		Date of Receipt 1 2 1 6 2 0 0 7
	City	State	Zip Code	Transaction ID: 68DC6E51-D139-47FE
	Deerfield	IL	60015-5075	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer self	Occupatio Ophthalr		
	Receipt For: Primary General Other (specify) ▼	, ' '	e Year-to-Date ▼ 250.00]
_).	Full Name (Last, First, Middle Initial) Michael Kass			Date of Receipt
	Mailing Address Department of Ophtha 660 S Euclid Avenue,	Campus Box	x 80	12 06 YYYYY
	City St. Louis	State MO	Zip Code 63110	Transaction ID: FL4FZZ510759 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	03110	365.00
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	, ' ' 	e Year-to-Date ▼ 365.00	
	SUBTOTAL of Receipts This Page (optional)		__	1115.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 58 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mark Kassels Mailing Address 1111 S Raleigh Av	re Ste 900	Date of Receipt
City Sheffield FEC ID number of contributing	State Zip Code AL 35660-6358	Transaction ID: F8FD1F0F-9965-4BC Amount of Each Receipt this Period 1000.00
Receipt For: Primary Other (specify)	Occupation Ophthalmologist Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Robert Knox Mailing Address 3000 Rogers Aven	ue	Date of Receipt 1 2 0 1 2 0 0 7
City Fort Smith	State Zip Code AR 72901-4232	Transaction ID: 7B95F090-08F6-4489 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	Occupation Ophthalmologist Aggregate Year-to-Date ▼ 500.00	500.00
Full Name (Last, First, Middle Initial) Douglas Kopp Mailing Address Suite 10		Date of Receipt 1 2 0 2 2 0 0 7
City Plainview FEC ID number of contributing federal political committee.	State Zip Code TX 79072-1802	Transaction ID: 3CC6787D-E2A7-40A Amount of Each Receipt this Period 1000.00
Name of Employer self	Occupation Ophthalmologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	al)	2500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant the name and address of any political committee to agy Inc Political Committee (OPHTHPAC)	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Sean Lalin Mailing Address Suite 101 25 Lindsley Drive City Morristown FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State Zip Code NJ 07960-4456 C Occupation Ophthalmologist Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Jeffrey Lanier Mailing Address Houston Eye Assoc 2855 Gramercy at E City Houston FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)		Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) John Lapenta Mailing Address 322 Dewey Street City Bennington FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State Zip Code VT 05201-2225 C Occupation Ophthalmologist Aggregate Year-to-Date 250.00	Date of Receipt M M / 20 / 2007 Transaction ID: 4TP5DH617809 Amount of Each Receipt this Period 250.00 Batch Tool - PAC
SUBTOTAL of Receipts This Page (optional)	875.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 58 (check only one) X
,	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	/ Inc Politica	I Committee (OPHTHPAC)	
∠ A.	Full Name (Last, First, Middle Initial) Andrew Lee			Date of Receipt
	Mailing Address 205 Black Springs Cir	cle		12 06 2007
	City	State	Zip Code	Transaction ID: FL4FY3622177
	Iowa City FEC ID number of contributing	C	52246-3801	Amount of Each Receipt this Period 500.00
	federal political committee.	<u> </u>		
	Name of Employer self	Occupation Ophthalr		Batch Tool - PAC
	Receipt For:	, ' ' ' 	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
_ В.	Full Name (Last, First, Middle Initial) Eligijus Lelis			Date of Receipt
	Mailing Address 14488 Hawthorn Drive	9		12 21 YYYY 12 21
	City State		Zip Code	Transaction ID: 8DAFL8326475
	Lemont	<u>IL</u>	60439-9126	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation Ophthalr		Batch Tool - PAC
	Receipt For:	- ' ' ' 	e Year-to-Date ▼	
	Primary General Other (specify) ▼		730.00	
_ C.	Full Name (Last, First, Middle Initial) Stewart Levine	<u> </u>		Date of Receipt
	Mailing Address 2634 Bell Blvd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: B0A13C8B-C29B-43B5
	Bayside	NY	11360-2539	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer self	Occupation Ophthalr		
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		250.00]
				1115.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 58 (check only one) X
\	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ 4.	Full Name (Last, First, Middle Initial) Monique Leys			Date of Receipt
	Mailing Address West Virginia Universi PO Box 9193	ity Eye Insti		12 18 2007
	City <u>Morgantown</u>	State WV	Zip Code 26506	Transaction ID: 2453af885dc8198de95 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		91.25
	Name of Employer self	Occupatio Ophthalr		
	Receipt For: Primary General Other (specify) ▼	, ' · · · · · · · · · · · · · · · · · · 	e Year-to-Date ▼ 365.00	
_ 3.	Full Name (Last, First, Middle Initial) Kenneth Lindahl			Date of Receipt
	Mailing Address Suite 101 30 N Union Street			12 06 2007
	City	State NY	Zip Code	Transaction ID: FL4FZZ626978
	Rochester FEC ID number of contributing federal political committee.	C	14607-1345	Amount of Each Receipt this Period 500.00
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
_ ;.	Full Name (Last, First, Middle Initial) Mark Lindsay			Date of Receipt
-	Mailing Address 2725 E 29th Street			1 2 1 3 2 0 0 7
	City Bryan	State TX	Zip Code 77802-2504	Transaction ID: 4UYFL6740117 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	77002-2304	25.00
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	, ' ' ' 	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			616.25

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS Any information copied from such Reports	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17			
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ny information copied from such Reports and Statements may not be sold or used by any person r for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)				
Full Name (Last, First, Middle Initial) Peter Lou Mailing Address Suite 106 10 Hawthorne Pla City Boston FEC ID number of contributing federal political committee. Name of Employer	Ce State Zip Code MA 02114-2336 C Occupation	Date of Receipt M M			
Receipt For: Primary General Other (specify) ▼	Ophthalmologist Aggregate Year-to-Date ▼ 365.00				
B. Full Name (Last, First, Middle Initial) Bryant Lum Mailing Address Suite A 3088 Telegraph First City Ventura FEC ID number of contributing federal political committee. Name of Employer	State Zip Code CA 93003-3235 C	Date of Receipt M M			
Receipt For: Primary General Other (specify)	Ophthalmologist Aggregate Year-to-Date ▼ 500.00				
Full Name (Last, First, Middle Initial) Scott MacRae Mailing Address Univ of Rochester 100 Meridian Cen City Rochester FEC ID number of contributing federal political committee. Name of Employer self		Date of Receipt M M M			
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	1216.25			
	mber only)	1210.25			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 58 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Academy of Ophthalmolo	ogy Inc Politica	Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) Timothy Malone			Date of Receipt
Mailing Address 731-F Walker Road	1 2 1 3 2 0 0 7		
City Great Falls	State VA	Zip Code 22066-2834	Transaction ID: 4UYFL6992388 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		365.00
Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) Richard Margolies			Date of Receipt
Mailing Address Suite 205 3355 Burns Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Palm Beach Gardens	State FL	Zip Code 33410-4356	Transaction ID: 8f42405b2bbcaeecc Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer self	Occupation Ophthaln		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Raul Masvidal			Date of Receipt
Mailing Address 250 Southwest Le J	eune Road		1 2 0 6 Y Y Y Y Y Y
City Miami	State FL	Zip Code 33134-1755	Transaction ID: FL4FX6839595 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		365.00
Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 365.00	
SUBTOTAL of Receipts This Page (optional)		855.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 58 (check only one) X
A	Any information copied from such Reports and Sor for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology			
Α.	Full Name (Last, First, Middle Initial) Kevin McAuliffe	Date of Receipt		
	Mailing Address 9925 San Jose Boulev	12 06 7 2007		
	City	State	Zip Code	Transaction ID: FL4FY3856352
	Jacksonville FEC ID number of contributing	FL	32257-5851	Amount of Each Receipt this Period
	federal political committee.	C		365.00
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
	Receipt For: Primary General	- ' ' ' 	e Year-to-Date ▼	1
	Other (specify) ▼		730.00	
– В.	Full Name (Last, First, Middle Initial) David McClure	Date of Receipt		
	Mailing Address 1255 Pineview Drive	1 2 0 1 Y Y Y Y Y Y Y Y		
	City	Transaction ID: d5a67c5c37725a7ee0b		
	Morgantown	WV	26505-2713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			312.50
	Name of Employer self	Occupatio Ophthalr		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1250.00	
_ C.	Full Name (Last, First, Middle Initial) David McCullough	Date of Receipt		
	Mailing Address 33 King Street	1 2 1 8 2 0 0 7		
	City	Transaction ID: 17fa6e7ddf1b6dbc298		
	Stratford	CT	06615-5849	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer Self Occupation Ophthalm			125.00
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
Γ	SUBTOTAL of Receipts This Page (optional)			802.50

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	on for the purpose of soliciting contributions o solicit contributions from such committee.	
A .	Full Name (Last, First, Middle Initial) John McGetrick Mailing Address Gessler Clinic 635 First St. N City Winter Haven FEC ID number of contributing federal political committee.	State Zip Code FL 33881	Date of Receipt 1 2
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthalmologist Aggregate Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Edward McGill Mailing Address Suite 405 7710 Mercy Road City Omaha FEC ID number of contributing	State Zip Code NE 68124-2346	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary Other (specify)	Occupation Ophthalmologist Aggregate Year-to-Date ▼ 250.00	Batch Tool - PAC
С.	Full Name (Last, First, Middle Initial) Travis Meredith Mailing Address University of Nc/Dep 5113 Bioinformatics City Chapel Hill FEC ID number of contributing federal political committee.	Date of Receipt 1 2 27 2007 Transaction ID: 4249a3ed8a66940937 Amount of Each Receipt this Period 91.25	
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthalmologist Aggregate Year-to-Date ▼ 273.75	
	SUBTOTAL of Receipts This Page (optional)		316.25

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 58 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	not be sold or used by any personers of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Academy of Ophthalmol	logy Inc Political	Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) Stephen Merfeld			Date of Receipt
Mailing Address 1885 W Pointe Dri	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Oshkosh	State WI	Zip Code 54902-4174	Transaction ID: FL4FY3158375
FEC ID number of contributing federal political committee.	C	34902-4174	Amount of Each Receipt this Period 365.00
Name of Employer self	Occupation Ophthalm		Batch Tool - PAC
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mariannette Miller-Meeks	 		Date of Receipt
Mailing Address Heartland Eye Card 1005 E Pennsylvar)	12 20 YYYYY 12 20 20 7
City Ottumwa	State IA	Zip Code 52501	Transaction ID: 4TP5DH168886
FEC ID number of contributing federal political committee.	C	J2501	Amount of Each Receipt this Period 1000.00
Name of Employer self	Occupation Ophthalm		Batch Tool - PAC
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Alan Mindlin			Date of Receipt
Mailing Address Suite 303 1750 S Telegraph	1 2 1 4 2 0 0 7		
City Bloomfield Hills	State MI	Zip Code 48302-0179	Transaction ID: 4UYFKT861907 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer self	Occupation Ophthalm		Batch Tool - PAC
Receipt For: Primary General Other (specify)		Year-to-Date ▼	
SUBTOTAL of Receipts This Page (options			2365.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 58 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	to solicit contributions from such committee.		
A .	Full Name (Last, First, Middle Initial) Perry Mollick Mailing Address One Center Lane	Date of Receipt		
	City Levittown	State NY	Zip Code 11756-1032	Transaction ID: FL4FY3174357 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	1 1 1 1 1	250.00 Batch Tool - PAC
	Name of Employer self Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	, ' ' ' 	on mologist e Year-to-Date ▼ 250.00	Batch 1001 - PAC
В.	Full Name (Last, First, Middle Initial) Frank Moya Mailing Address Suite 100 2025 Frontis Plaza Bo	Date of Receipt 1 2 1 8 2 0 0 7		
	City Winston Salem FEC ID number of contributing	State NC	Zip Code 27103-5663	Transaction ID: 6bca0da2adce84463df Amount of Each Receipt this Period
	federal political committee. Name of Employer	Occupation	on	125.00
	Receipt For: Primary General Other (specify) ▼	, ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	mologist e Year-to-Date ▼ 500.00	
С.	Full Name (Last, First, Middle Initial) Raji Mulukutla Mailing Address 18 W Wynd Ter	Date of Receipt 1 2 1 7 2 0 0 7		
	City Middletown	State CT	Zip Code	Transaction ID: 4E07ABB4-86AD-4660-
	FEC ID number of contributing federal political committee.	C	06457-8730	Amount of Each Receipt this Period 500.00
	Name of Employer self	Occupation Ophthali	on mologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			875.00
ſ	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	` '	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)				
Α.	Full Name (Last, First, Middle Initial) Romen Nayar			Date of Receipt		
	Mailing Address 81 Ford Avenue	12 02 2007				
	City <u>Wharton</u>	State NJ	Zip Code 07885-2555	Transaction ID: 47e18c841c98a7ff98b1 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	07000 2000	125.00		
	Name of Employer self	Occupatio Ophthalr				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00			
ь. В.	Full Name (Last, First, Middle Initial) Jarl Nielsen	Date of Receipt				
	Mailing Address Nevada Retina Assoc 610 Sierra Rose Drive	12 04 2007				
	City <u>Reno</u>	State NV	Zip Code	Transaction ID: C1UECX167021		
	FEC ID number of contributing federal political committee.		89511	Amount of Each Receipt this Period 500.00		
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00			
С. С.	Full Name (Last, First, Middle Initial) Kelly Patrick O'Neill	Date of Receipt				
	Mailing Address 7593 Tylers Place Blv Ste 107	12 09 2007				
	City West Chester	State OH	Zip Code 45069-6313	Transaction ID: D2C6697D-5FAA-41B6- Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer Occupation Self Ophthalm					
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00			
	SUBTOTAL of Receipts This Page (optional)			1125.00		
Ì	TOTAL This Period (last page this line number					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17	
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Ophthalmolog	on for the purpose of soliciting contributions o solicit contributions from such committee.			
A .	Full Name (Last, First, Middle Initial) Radu Pacurariu Mailing Address Suite 201 920 Wyoming Avenue City Forty Fort FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General	State PA C Occupatio Ophthalr		Date of Receipt M M M	
В.	Full Name (Last, First, Middle Initial) Gregory Panzo Mailing Address 2037 Crooked Lake E City Eustis FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify) ▼	State FL C Occupatio Ophthalr	Zip Code 32726-5721	Date of Receipt M M J 24 Y 2007 Transaction ID: 4c5eb5f9973be513e099 Amount of Each Receipt this Period 625.00	
с.	Full Name (Last, First, Middle Initial) Maria Patterson Mailing Address 12690 W North Aven City Brookfield FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State WI C Occupatio Ophthalr		Date of Receipt 1 2 0 6 2 0 0 7 Transaction ID: FL4FY3161122 Amount of Each Receipt this Period 365.00 Batch Tool - PAC	
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		<u> </u>	1240.00	

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any persithe name and address of any political committee (OPHTHPAC)	
American Academy of Ophthalmolo	gy me i dilical dominilee (di iiii Ad)	
Full Name (Last, First, Middle Initial) Larry Jeffrey Payne Mailing Address Suite C		Date of Receipt
535 Jesse Jewell Pa	•	12 27 2007
City <u>Ga</u> inesville	State Zip Code GA 30501-3772	Transaction ID: 6a10513515539ba7e
FEC ID number of contributing federal political committee.	C 30301-3772	Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation Ophthalmologist	Batch Tool - PAC
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Charles Peter Mailing Address 2305 Tinkham Rd	_ 	Date of Receipt
Mailing Address 2305 TINKHam Rd		12 17 2007
City	State Zip Code	Transaction ID: BEBEEF1E-A3D7-4E
Akron	OH 44313-4467	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer self	Occupation Ophthalmologist	
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Peter Pritchett	l	Date of Receipt
Mailing Address 1800 E Pavilion Place	се	1 2 2 1 2 0 0 7
City	State Zip Code	Transaction ID: cfd9f4eae00482c3488
Montrose	CO 81401-5499	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer self	Occupation Ophthalmologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional		1500.00

Ar			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any personders of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Academy of Ophthalmology			
Α.	Full Name (Last, First, Middle Initial) Brian Ranelle	Date of Receipt		
	Mailing Address 1872 Norwood Drive		7: 0 1	12 06 2007
	City Hurst	State TX	Zip Code 76054-3066	Transaction ID: FL4FX6403028 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
 3.	Full Name (Last, First, Middle Initial) Prabakar Rao			Date of Receipt
	Mailing Address Barnes Retina Institute 1600 S Brentwood Boulevard Suite 8			12 / 13 / 2007
	City St. Louis	State MO	Zip Code 63144	Transaction ID: 4UYFL6257652 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00144	500.00
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
— ;.	Full Name (Last, First, Middle Initial) William Reinhart			Date of Receipt
	Mailing Address 32590 Burlwood Drive	•		12 20 7 2007
	City Solon	State OH	Zip Code 44139-1316	Transaction ID: 4TP5DH281647
	FEC ID number of contributing federal political committee.	C	44139-1316	Amount of Each Receipt this Period 250.00
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	, ' ' ' 	e Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)	1		1250.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Academy of Ophthalmology	Inc Politica	I Committee (OPHTHPAC)	
A.	Full Name (Last, First, Middle Initial) Allen Richmond			Date of Receipt
	Mailing Address Suite 302 3998 Red Lion Road			12 21 2007
	City	State PA	Zip Code	Transaction ID: 8DAFL8860741
	Philadelphia FEC ID number of contributing		19114-1441	Amount of Each Receipt this Period
	federal political committee.	C		250.00
	Name of Employer self	Occupation Ophthali		Batch Tool - PAC
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
В.	Full Name (Last, First, Middle Initial) Claudia Richter			Date of Receipt
	Mailing Address Ophth Cnslt Boston 50 Staniford Street Suite 600			12 20 7 207
	City	State	Zip Code	Transaction ID: 4TP5DH609176
	Boston FEC ID number of contributing	MA	2114	Amount of Each Receipt this Period
	federal political committee.	C		1000.00
	Name of Employer self	Occupation Ophthali		Batch Tool - PAC
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		1100.00	
C.	Full Name (Last, First, Middle Initial) Jesse Rigsby			Date of Receipt
	Mailing Address Suite 103 834 N Seminary Street	İ		12 12 2007
	City	State	Zip Code	Transaction ID: 76cc442d9ad03053c35
	Galesburg	<u>IL</u>	61401-2897	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer self	Occupation Ophthali		
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼	0 0	500.00	
	SUBTOTAL of Receipts This Page (optional)		\	1375.00
	TOTAL This Period (last page this line number			

	OULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 5 (check only one) X 11a	<u>58</u>
Any inforn or for com	nation copied from such Reports and S imercial purposes, other than using the	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contribution a solicit contributions from such committee	s
1 1	OF COMMITTEE (In Full) ican Academy of Ophthalmology	Inc Politica	I Committee (OPHTHPAC)		
	ame (Last, First, Middle Initial) osenberg			Date of Receipt	
	Address Ocusight Eye Care Ce 1015 Ridge Road			12 / 06 / Y Y Y	7
City Webs	ster	State NY	Zip Code 14580-2907	Transaction ID: FL4FY3113125 Amount of Each Receipt this Period	
FEC II	O number of contributing political committee.	C	11000 2007	500.0	U
Name self	of Employer	Occupation Ophthaln		Batch Tool - PAC	
	ot For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00		
	ame (Last, First, Middle Initial) Rothberg			Date of Receipt	
Mailing	Address 3820 Tampa Rd Ste 101			12 30 YYYY 12 30 200	
City	0.0 101	State	Zip Code	Transaction ID: 85EE7BFB-C64	
<u>Palm</u>	Harbor	<u>FL</u>	34684-3609	Amount of Each Receipt this Period	I .
	O number of contributing political committee.	C		500.0	00
Name self	of Employer	Occupation Ophthaln			
	ot For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 500.00]	
	ame (Last, First, Middle Initial) Rothman			Date of Receipt	
Mailing	Address 58 Marian Lane			12 06 YYYY 1200	
City		State	Zip Code	Transaction ID: FL4FY3691716	
	O number of contributing political committee.	C	11753-1841	Amount of Each Receipt this Period 365.0	-
Name self	of Employer	Occupation Ophthaln		Batch Tool - PAC	
	ot For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 365.00		
SUBTOT	AL of Receipts This Page (ontional)			1365.0	0
	TAL of Receipts This Page (optional) This Period (last page this line number		<u> </u>	1365.0	10

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any per the name and address of any political committee	
/ American Academy of Ophthalmolo	gy Inc Political Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) Stanley Rous	_	Date of Receipt
Mailing Address Building C, Suite 200 7800 W Oakland Pa		12 05 2007
City	State Zip Code	Transaction ID: 4528bbde78590a70
Fort Lauderdale	FL 33351-6741	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	91.25
Name of Employer self	Occupation Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	273.75	
Full Name (Last, First, Middle Initial) John Rowda		Date of Receipt
Mailing Address West Coast Eye Inst 240 N Lecanto High	way	12 / 10 / 2007
City	State Zip Code	Transaction ID: 8671015C-47C9-4D
Lecanto	FL 34461	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer self	Occupation Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	365.00	
Full Name (Last, First, Middle Initial) Dennis Ryan		Date of Receipt
Mailing Address 230 20th St. S		12 18 2007
City	State Zip Code	Transaction ID: 0551865
La Crosse	WI 54601-4215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer self	Occupation ophthalmologist	Batch Tool - PAC
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
CURTOTAL of Descripts This Dags (antional))	756.25

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant the name and address of any political committee to agy Inc Political Committee (OPHTHPAC)	on for the purpose of soliciting contributions solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) A. Edwin Hurlbut Ryan	9, (2)	Date of Receipt		
<u> </u>	Mailing Address 7760 France Avenue S Suite 310			
City Minneapolis	State Zip Code MN 55435-3216	Transaction ID: 478ab07b8ce511904b4 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	125.00		
Name of Employer self	Occupation Ophthalmologist			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00			
Full Name (Last, First, Middle Initial) Paul Ryan		Date of Receipt		
Mailing Address Suite D 1420 Tara Hills Driv		12 21 2007		
City Pinole	State Zip Code CA 94564-2530	Transaction ID: 88ZEQZ582748 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	400.00		
Name of Employer self	Occupation Ophthalmologist	Batch Tool - PAC		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00			
Full Name (Last, First, Middle Initial) C. Ralph Sando		Date of Receipt		
Mailing Address 101 Laurier Place		12 20 2007		
City	State Zip Code	Transaction ID: 4TP5DH120954		
Bryn Mawr FEC ID number of contributing federal political committee.	PA 19010-2247	Amount of Each Receipt this Period 500.00		
Name of Employer self	Occupation Ophthalmologist	Batch Tool - PAC		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00			
SUBTOTAL of Receipts This Page (optional)	1025.00		
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line numb	·	. 10		

Mailing Address Suite 101 1517 Nicholasville Road City State Zip Code Lexington KY 40503-1429 FEC ID number of contributing federal political committee. Name of Employer self Ophthalmologist Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) M Charles Schlecte Mailing Address 321 Richland West Circle Mailing Address 321 Richland West Circle Mailing Address Suite 101 12 / 18 / 2 0 0 7 Transaction ID: 0238966 Amount of Each Receipt this Period Agoregate Year-to-Date ▼ Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	ITEMIZ	DULE A (FEC Form 3X) ED RECEIPTS	ntomonte ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Desires Staterfield Mailling Address 5301 F Street Suite 202 City State Zip Code Sacramento CA 95819-3221 FEC ID number of contributing federal political committee. Name of Employer Self State Zip Code Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) John Saunders Mailling Address Suite 101 1517 Nicholasville Road City State Zip Code Lexington KY 49593-1429 FEC ID number of contributing federal political committee. Name of Employer Self Cocupation Ophthalmologist Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) John Saunders Amount of Each Receipt For: Primary General Ophthalmologist Receipt For: Primary General Other (specify) ▼ FEC ID number of contributing federal political committee. C. Marie of Employer Self School Feld Name (Last, First, Middle Initial) Mcharles Schlecte Mailing Address 321 Richland West Circle City State Zip Code TX 76712-7919 FEC ID number of contributing federal political committee. C. Marie of Employer Primary General Ophthalmologist Receipt For: Primary General Ophthalmologist	or for com	mercial purposes, other than using the r OF COMMITTEE (In Full)	name and ad	dress of any political committee to	o solicit contributions from such committee.
City State Zip Code Sacramento CA 95819-3221 FEC ID number of contributing federal political committee. Name of Employer Side Suite 101 1517 Nicholasville Road City State Zip Code Lexington KY 40503-1429 FEC ID number of contributing federal political committee. B. Full Name (Last, First, Middle Initial) John Saunders Mailing Address Suite 101 1517 Nicholasville Road City State Zip Code Lexington KY 40503-1429 FEC ID number of contributing federal political committee. Name of Employer Self Soloce Middling Address 321 Richland West Circle City State Zip Code Middling Address 321 Richland West Circle City State Zip Code Middling Address 321 Richland West Circle City State Zip Code Middling Address 321 Richland West Circle City State Zip Code Middling Address 321 Richland West Circle City State Zip Code Middling Address 321 Richland West Circle City State Zip Code Transaction ID: PAC Date of Receipt Middling Address 321 Richland West Circle City State Zip Code Transaction ID: 084408a1c5c2f705a Amount of Each Receipt this Period FEC ID number of contributing federal political committee. City State Zip Code Tx 76712-7919 FEC ID number of contributing federal political committee. Name of Employer Self Occupation Ophthalmologist Ophthalmologist Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Cocupation Ophthalmologist Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code Tx 76712-7919 Transaction ID: 084408a1c5c2f705a Amount of Each Receipt this Period Transaction ID: 084408a1c5c2f705a Amount of Each Receipt this Period FEC ID number of contributing federal political committee. City State Stat	A. Denise	Satterfield			M M / D D / Y Y Y Y
Name of Employer Occupation Ophthalmologist Receipt For: Primary General Occupation Ophthalmologist Occupation Ophthalmologist Ophtha	-	mento		•	Transaction ID: FL4FY3959618
Name of Employer self			C		
Mailing Address Suite 101 1517 Nicholasville Road City State Zip Code Lexington KY 40503-1429 FEC ID number of contributing federal political committee. Name of Employer Self Other (specify) ▼ Full Name (Last, First, Middle Initial) M Charles Schlecte Mailing Address 321 Richland West Circle Transaction ID: 0238966 Amount of Each Receipt this Period Batch Tool - PAC Batch Tool - PAC Date of Receipt Transaction ID: 0238966 Amount of Each Receipt this Period Batch Tool - PAC Batch Tool - PAC Date of Receipt Transaction ID: 0238966 Amount of Each Receipt this Period Batch Tool - PAC Date of Receipt Transaction ID: 0238966 Amount of Each Receipt this Period Date of Receipt Transaction ID: 084408a1c5c2f705a Amount of Each Receipt this Period Transaction ID: 084408a1c5c2f705a Amount of Each Receipt this Period Period Period Period Transaction ID: 084408a1c5c2f705a Amount of Each Receipt this Period Transaction ID: 084408a1c5c2f705a Amount of Each Receipt this Period Period Period Transaction ID: 084408a1c5c2f705a Amount of Each Receipt this Period Transaction ID: 084408a1c5c2f705a Amount of Each Receipt this Period Transaction ID: 084408a1c5c2f705a Amount of Each Receipt this Period Transaction ID: 084408a1c5c2f705a Amount of Each Receipt this Period Transaction ID: 084408a1c5c2f705a Amount of Each Receipt this Period Transaction ID: 084408a1c5c2f705a Amount of Each Receipt this Period Transaction ID: 084408a1c5c2f705a Amount of Each Receipt this Period Transaction ID: 084408a1c5c2f705a Transaction ID: 084408a1c5c2f705a Amount of Each Receipt this Period Transaction ID: 084408a1c5c2f705a	self Receipt	t For: General	Ophthalr	mologist e Year-to-Date ▼	Batch 1001 - PAC
Lexington KY 40503-1429 Amount of Each Receipt this Period	B. John Sa	Address Suite 101	i		M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer self Name of Employer	•	wton		•	
Name of Employer self Cocupation Ophthalmologist	FEC ID	number of contributing		40503-1429	365.00
Primary General Other (specify) ▼ State Zip Code Transaction ID: 084408a1c5c2f705a	self		Ophthalr	mologist	Batch Tool - PAC
Mailing Address 321 Richland West Circle City State Zip Code Waco TX 76712-7919 FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary Other (specify) ▼ Date of Receipt Transaction ID: 084408a1c5c2f705a Amount of Each Receipt this Period 125.00	P	rimary General	Aggregate	1 1 1 1 1 1 1	
City State Zip Code TX 76712-7919 FEC ID number of contributing federal political committee. Name of Employer self Primary General Other (specify) ▼ State Zip Code TX 76712-7919 Amount of Each Receipt this Period 125.00 C 125.00	C. M Char	les Schlecte	le		M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer self Occupation Ophthalmologist Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	•			·	Transaction ID: 084408a1c5c2f705a8f
Self Ophthalmologist Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	FEC ID			76712-7919	
Primary General Other (specify) ▼ 500.00		of Employer			
SUBTOTAL of Receipts This Page (optional) 855.00	P	rimary General	Aggregate		
V age (optional)	SUBTOT	AL of Receipts This Page (optional))	855.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Academy of Ophthalmology	Inc Politica	I Committee (OPHTHPAC)	
Α.	Full Name (Last, First, Middle Initial) Jane Semel			Date of Receipt
	Mailing Address Suite 906 8540 S Sepulveda Bou	levard		12 25 2007
	City	State CA	Zip Code	Transaction ID: 1f72b17f82e2f2ba98d
	Los Angeles FEC ID number of contributing federal political committee.	C	90045-3828	Amount of Each Receipt this Period 91.25
	Name of Employer self	Occupatio Ophthalr		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 365.00	
В.	Full Name (Last, First, Middle Initial) David Silbert			Date of Receipt
	Mailing Address Family Eye Group 2110 Harrisburg Pike			12 25 7 2007
	City Lancaster	State PA	Zip Code 17601-2644	Transaction ID: 4ac669fa8a58810aa35
	FEC ID number of contributing federal political committee.	C	17001-2044	Amount of Each Receipt this Period 125.00
	Name of Employer self	Occupatio Ophthalr		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
C.	Full Name (Last, First, Middle Initial) Scott So			Date of Receipt
	Mailing Address Suite 214 2100 Webster Street			12 14 2007
	City San Francisco	State CA	Zip Code 94115-2375	Transaction ID: 4UYFKT522047 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	34110 2370	365.00
	Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 365.00	
	SUBTOTAL of Receipts This Page (optional)			581.25
	TOTAL This Period (last page this line number of			

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 58 (check only one) X
A C	Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Academy of Ophthalmolog			
	Full Name (Last, First, Middle Initial) Robert Sorenson			Date of Receipt
	Mailing Address 361 N San Jacinto St	reet		12 18 2007
	City <u>Hemet</u>	State CA	Zip Code 92543-3118	Transaction ID: bf65f8ffdbe4bb018c0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer self	Occupation Ophthalr		
	Receipt For: Primary General Other (specify) ▼	- ' ' '	e Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Rand Spencer			Date of Receipt
	Mailing Address 3612 Overbrook Drive			12 20 2007
	City	State	Zip Code	Transaction ID: 4TP5DH188262
	Dallas	TX	75205-4327	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation Ophthalr		Batch Tool - PAC
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		730.00	
_	Full Name (Last, First, Middle Initial) David Stager			Date of Receipt
	Mailing Address 8201 Preston Road S	Suite 140A		12 06 2007
	City Dallas	State TX	Zip Code 75225-6206	Transaction ID: FL4FX6686695 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	, ollo ollo	500.00
	Name of Employer self	Occupation Ophthalr		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1500.00	
	SUBTOTAL of Receipts This Page (optional)	1		990.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 58 (check only one) X 11a
,	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	e name and ad	dress of any political committee t	o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Mitchell Brian Stein Mailing Address 69 S Moger Ave City Mount Kisco FEC ID number of contributing federal political committee. Name of Employer self	State NY C Occupation Ophthali	mologist	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
_	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
В.	Full Name (Last, First, Middle Initial) Drew Stoken Mailing Address 338 Alexander Spring	Road		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State PA	Zip Code	Transaction ID: f6d5b52701e5a10b338
	Carlisle FEC ID number of contributing federal political committee.	C	17015-9129	Amount of Each Receipt this Period 125.00
	Name of Employer self Receipt For:	Occupation Ophthali Aggregate		
	Primary General Other (specify) ▼		625.00	
C.	Full Name (Last, First, Middle Initial) Jerry Suelflow Mailing Address 8333 North Davis Hig	hway		Date of Receipt 1 2 0 6 2 0 0 7
	City	State	Zip Code	Transaction ID: FL4FY3674695
	Pensacola FEC ID number of contributing federal political committee.	FL C	32514-6050	Amount of Each Receipt this Period 500.00
	Name of Employer self	Occupation Ophthali		Batch Tool - PAC
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .			1125.00
İ	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 58 (check only one) X 11a
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any persite name and address of any political committee to	
/ American Academy of Ophinamiolo	gy me i omical committee (Oi iiii Ao)	
Full Name (Last, First, Middle Initial) Shigemi Sugiki Mailing Address 1380 Lusitana Stree	t Suite 714	Date of Receipt
-		12 06 2007
City	State Zip Code HI 96813-2443	Transaction ID: FL4FX6176775
Honolulu	HI 96813-2443	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00 Batch Tool - PAC
Name of Employer self	Occupation Ophthalmologist	Balch 1001 - PAC
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Steven Swedberg		Date of Receipt
Mailing Address Suite 230 21600 Highway 99		12 04 2007
City	State Zip Code	Transaction ID: C1UECX911643
Edmonds	WA 98026-8048	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	135.00
Name of Employer self	Occupation Ophthalmologist	Batch Tool - PAC
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Gareth Tabor		Date of Receipt
Mailing Address Suite 240 27 S State Street		1 2 1 1 2 2 0 0 7
City	State Zip Code	Transaction ID: 4c1dbbfd3a7887878
Lake Oswego	OR 97034-3935	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer self	Occupation Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
SUBTOTAL of Receipts This Page (optional		1385.00

Γ	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS Any information copied from such Reports and S	tatements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	name and ad	dress of any political committee to	o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Carla Territo Mailing Address Suite 3011 1224 Graham Road City Florissant FEC ID number of contributing federal political committee.	State MO	Zip Code 63031-8028	Date of Receipt M M M
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthalr Aggregate		
— В.	Full Name (Last, First, Middle Initial) Victor Thomas Mailing Address Suite 111 225 W State Road 434 City Longwood FEC ID number of contributing federal political committee.	State FL	Zip Code 32750-4980	Date of Receipt M M M
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthalr Aggregate		Batch Tool - PAC
С.	Full Name (Last, First, Middle Initial) David Ugland Mailing Address 135 S Sharon Amity R	oad 100		Date of Receipt 1 2 0 6 2 0 0 7
	City Charlotte FEC ID number of contributing federal political committee.	State NC	Zip Code 28211-3870	Transaction ID: FL4FX6321713 Amount of Each Receipt this Period 365.00
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthalm Aggregate		Batch Tool - PAC
	SUBTOTAL of Receipts This Page (optional)			855.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16 17
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persue name and address of any political committee to y Inc Political Committee (OPHTHPAC)	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) W Lee Wan Mailing Address 1700 N Rose Ave Ste 200 City Oxnard FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General	State Zip Code CA 93030-3791 C Occupation Ophthalmologist Aggregate Year-to-Date 625.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Nancy Wang Mailing Address Suite 203 1807 Wilshire Boulev City Santa Monica FEC ID number of contributing federal political committee. Name of Employer	1 0 0 0 0 0 0 0 0	Date of Receipt M M
self Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Floyd Warren Mailing Address 530 First Avenue Sui	Ophthalmologist Aggregate Year-to-Date ▼ 500.00	Date of Receipt
City New York FEC ID number of contributing federal political committee.	State Zip Code NY 10016-6402	Transaction ID: 1eeaa9796dda2dca2ds Amount of Each Receipt this Period 91.25
Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthalmologist Aggregate Year-to-Date ▼ 365.00	
SUBTOTAL of Receipts This Page (optional)		716.25

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 58 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	Statements may not be sold or used by any persename and address of any political committee to Inc Political Committee (OPHTHPAC)	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Bruce Weinberger Mailing Address 700 Quail Creek Drive City Amarillo FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State Zip Code TX 79124-1607 C Occupation Ophthalmologist Aggregate Year-to-Date 300.00	Date of Receipt 1 2
Full Name (Last, First, Middle Initial) Barry Welch Mailing Address Suite 280 721 Sheridan Avenue City Cody FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State Zip Code WY 82414-3439 C Occupation Ophthalmologist Aggregate Year-to-Date 1200.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Robert Welch Mailing Address 526 H Shoup Avenue City Twin Falls FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State Zip Code ID 83301-5050 C Occupation Ophthalmologist Aggregate Year-to-Date ▼	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)		850.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 58 (check only one) X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any per he name and address of any political committee gy Inc Political Committee (OPHTHPAC)	son for the purpose of soliciting contributions to solicit contributions from such committee.
American Academy of Ophthalmolog	gy me Fomical Committee (OFTTTIFAC)	
Full Name (Last, First, Middle Initial) Jeffrey Whitman Mailing Address Suite 400		Date of Receipt
2801 Lemmon Avenu		12 20 2007
City	State Zip Code	Transaction ID: 4TP5DH818598
Dallas	TX 75204-2399	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00 Batch Tool - PAC
Name of Employer self	Occupation Ophthalmologist	Batch 1001 - PAC
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	365.00	
Full Name (Last, First, Middle Initial) Arthur Willis		Date of Receipt
Mailing Address Suite 200 2727 Gramercy Stree	et	12 20 YYYYY 12 20 20 1 2007
City	State Zip Code	Transaction ID: 4TP5DH924759
Houston	TX 77025-1716	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer self	Occupation Ophthalmologist	Batch Tool - PAC
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	1000.00	
Full Name (Last, First, Middle Initial) Z Nicholas Zakov		Date of Receipt
Mailing Address 7779 Sugarbush Lar	ne	1 2 0 3 2 0 0 7
City	State Zip Code	Transaction ID: 4ba288129df6c8e90
Gates Mills	OH 44040-9756	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer self	Occupation Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
		1490.00

A.

В.

PAGE 52/58 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 17 13 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Z Nicholas Zakov Date of Receipt Mailing Address 7779 Sugarbush Lane 12 03 200.7 Zip Code City State Transaction ID: 419e9b788e045ac72ade Gates Mills OH 44040-9756 Amount of Each Receipt this Period FEC ID number of contributing 125.00 C federal political committee. Name of Employer self Occupation Ophthalmologist Receipt For: Aggregate Year-to-Date Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Carol Ziel Date of Receipt Mailing Address McKinley and Ziel Ophthalmology 20 2007 2025 Frontis Plaza Boulevard Suite City Transaction ID: 4TP5DH615514 State Zip Code Winston Salem NC 27103 Amount of Each Receipt this Period FEC ID number of contributing C 365.00 federal political committee. Batch Tool - PAC Name of Employer Occupation Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General

740.00

SUBTOTAL of Receipts This Page (optional)	•	490.00
TOTAL This Period (last page this line number only)	•	54706.25

Other (specify)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 58 (check only one) 11a 11b 11c 12 13 14 15 16 X 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any pers dress of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	Inc Politica	I Committee (OPHTHPAC)	
A.	Full Name (Last, First, Middle Initial) Kimberley Beaudet			Date of Receipt
	Mailing Address 3375 SW Terwilliger B	lvd		12 29 2007
	City	State	Zip Code	Transaction ID: 7cfa87fe1e595c6a3ba
	Portland	OR	97239-4146	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Casey Eye Inst	Occupatio Technicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
- В.	Full Name (Last, First, Middle Initial) Wells Fargo Bank N.A.			Date of Receipt
	Mailing Address PO Box 63020			12 31 2007
	City	State	Zip Code	Transaction ID: 26317-36315554380417
	San Francisco	CA	94163	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2862.67
	Name of Employer	Occupatio	n	Bank interest 12/07
	Receipt For: Primary General Other (specify)	11.	e Year-to-Date ▼ 12557.30	

SUBTOTAL of Receipts This Page (optional)	•	3112.67
TOTAL This Period (last page this line number only)	•	3112.67

В.

C.

SCHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 54 / 58 (check only one)										
ITEMIZED DISBURSEMENTS	for each cate Detailed Sum		X	21b 27		22 28a	\square	23 28b	П	24 28c	П	25 29	П	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				persor		the pu	ırpos	e of s		ing co		utions	<u> </u>	002
NAME OF COMMITTEE (In Full)														
American Academy of Ophthalmology Inc	Political Com	mittee (OPI	HTHPA	AC)										
Full Name (Last, First, Middle Initial)						Trans	sactio	on ID	: 20	6317	-283	35809	9588	 4323
Union Bank						Date								
Mailing Address 400 California Street						1 ^M 2	M /	D 3	3 ^D	/ Y	ž	0 ŏ 7	7 ^Y	
City San Francisco		p Code 4104				Amou	ınt of	Each	n Disl	burse	ment	this F	Perio	d
Purpose of Disbursement				-							_ 1	18.8	7	
Bank fees 12/07			00.	1										
Candidate Name			Categ Typ	-										
Senate President	ement For: Primary Other (specify)	General ▼												
State: District:														
Full Name (Last, First, Middle Initial) Union Bank						Trans Date					-769	95428	3729	0573
Mailing Address 400 California Street						1 ^M 2	M /	D 3	3 ^D	/ Y	ž	0 ŏ 7	7 ^Y	
City San Francisco		p Code 4104				Amou	ınt of	Each	n Disl	burse	nent	this F	Perio	d
Purpose of Disbursement Bank fees 12/07			00	1							11	50.74	4	
Candidate Name			Categ	ory/										
Senate President	ement For: Primary Other (specify)	General ▼												
State: District:														
Full Name (Last, First, Middle Initial) Wells Fargo Bank N.A.						Trans Date					-290)4474	4139	2135
Mailing Address PO Box 63020						1 ^M 2	M /	D 3	3 1	/ Y	ž	0 ŏ 7	7 Y	
City	State Zi	p Code				Amou	ınt of	Each	n Disl	bursei	ment	this F	Perio	
San Francisco	CA 9	4163				-								
Purpose of Disbursement AMEX Fees 12/07			00	1				•			. 4	42.7	1	
Candidate Name			Categ Typ											
Office Sought: House Disburse Senate President	ement For: Primary Other (specify)	General ▼												
State: District:	_													
SUBTOTAL of Disbursements This Page (optional)				<u> </u>							17	12.32	2	

1712.32

TOTAL This Period (last page this line number only)

	SCHEDULE B (FEC Form 3X)		Use separate schedule(s)				IE NUMBER: PAGE 55 / 58 nly one)							58
_	TEMIZED DISBURSEMENTS	for each Detailed	category of the Summary Page		À	21b 27	22 28a	Х	23 28b		24 28c	В	25 29	26 30b
	Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam													3
	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc													
∠ A .	Full Name (Last, First, Middle Initial) Friends of Jay Rockefeller								ion IE			-370	69800	006694
	Mailing Address PO Box 1909						1 ^M 2	М	/ D	2 1		Ž	0 ŏ 7	7 ^Y
	City Charleston	State WV	Zip Code 25327				Amo	unt o	f Eac	h D	isburse			
	Purpose of Disbursement Contribution				01	1	L.		-			25	500.00	0
	Candidate Name John D. Rockefeller, IV			С	ateg Typ	-								
		ement For: Primary Other (spe	2008 General											
_ B.	State: WV District: Full Name (Last, First, Middle Initial)						Tran	sacti	ion IE) :	01821	-594	4326 ⁻	198101
Ь.	Marsha Blackburn for Congress Inc.						М	М	isburs			/ ` Y	Y	Y
	Mailing Address PO Box 682185						1 2		L	2 1	J. L	2	0 ŏ 7	<u>'</u>
	City Franklin	State TN	Zip Code 37068				Amo	unt o	f Eac	h D	isburse	emen	t this F	Period
	Purpose of Disbursement Contribution				01	i						20	00.00	0
	Candidate Name Marsha Blackburn			С	ateg Typ	-								
	· ·	ement For: Primary Other (spe	2008 General											
C.	Full Name (Last, First, Middle Initial) Nadler for Congress						Date	of D	isburs	sem	ent			152202
	Mailing Address Village Station PO Box 4	-0					1 ^M 2	М	/ D	0 4		ž	0 ŏ 7	7 ^Y
	City New York	State NY	Zip Code 10014				Amo	unt o	f Eac	h D	isburse	-		
	Purpose of Disbursement Contribution				01		L.					25	500.00	0
	Candidate Name Jerrold Nadler			С	ateg Typ									
	Senate X President	ement For: Primary Other (spe	2008 General											
Г	State: NY District: 08								_	_				
	SUBTOTAL of Disbursements This Page (optional)					<u> </u>	L.					70	00.00)
	TOTAL This Period (last page this line number only)					•								

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District: 02

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SCHEDULE B (FEC Form 3X)		INE NUMBER: PAGE 56 / 58
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page (check	only one) 22
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam		
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	Political Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) Storm Chasers		Transaction ID: 01821-2195093035697 Date of Disbursement 1 2 1 2 1 2 0 0 7
Mailing Address PO Box 237		12 21 2007
City Monticello	State Zip Code IN 47960	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	011	5000.00
Candidate Name	Category/ Type	
Senate President X	ement For: 2007 Primary General Other (specify)	
State: District: Contrib Full Name (Last, First, Middle Initial)	ution	T ID 04040 0000044005070
Wally Herger for Congress Committee		Transaction ID: 21916-3233911395072 Date of Disbursement
Mailing Address PO Box 1500		12 0 4 7 2 0 0 7
City Chico	State Zip Code CA 95927	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	011	1500.00
Candidate Name Wally Herger	Category/ Type	
X	ement For: 2008 Primary General Other (specify)	

SUBTOTAL of Disbursements This Page (optional)	•	6500.00
TOTAL This Period (last page this line number only)	•	13500.00

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SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE N (check only o	
TEIMIZED DIODOTICEMENTO	Detailed Summary Page	21b X	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	Political Committee (OPHT	HPAC)	
Full Name (Last, First, Middle Initial) Timothy Gard			Transaction ID: 41433-17080324888229 Date of Disbursement
Mailing Address 512 E Main Street			$\begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} D & 1 & D \\ 1 & 7 & D \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix}$
City Hillsboro	State Zip Code OR 97123-4159		Amount of Each Disbursement this Period
Purpose of Disbursement Duplicate		010	100.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: 08094-78454226255417
David Najafi			Date of Disbursement
Mailing Address PO Box 927850			$\begin{bmatrix} 1 & 2 & M & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1$
City San Diego	State Zip Code CA 92192-7850		Amount of Each Disbursement this Period
Purpose of Disbursement		010	365.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	•	465.00
TOTAL This Period (last page this line number only)	•	465.00

State:

Image# 28991632008

Form/Schedule: **F3XA**Transaction ID:

This second Amended Year End Report includes a correction to Line 11(a)(i) and 11(a)(ii), Column B. Also, Line 17 includes a deposit of \$250 from K Beaudet that does not belong to Ophthpac. The money will be transferred out of the account.